PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

			or Fax	Alexandria, Virginia 22313-1450 (571)-273-2885				
INSTRUCTIONS: This appropriate, All further indicated unless correct maintenance fee notifier	s form should be used correspondence includi- ted below or directed of ations.	for transmitting the ISS ng the Patent, advance o herwise in Block 1, by (UE FEE and PUBLIC. rders and notification (a) specifying a new co	ATION FEE (if requ of maintenance fees rrespondence address				
	DENCE ADDRESS (Note: Use B		Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
32914 .	7590 01/03	•						
INTELLECTUA 3000 THANKS	YNNE SEWELL AL PROPERTY SE GIVING TOWER		Lheroby certify that this FcqC) Transmittal is being deposited with the United States Postal Service with sufficient postage for first elass mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being fleximate transmitted to the USPTO (\$71),873-2885, on the date indicated below.					
1601 ELM ST DALLAS, TX 75201-4761				Kelly Breeze	1/1		(Deposi	itor's name)
Ditterio, In Jav. 1701				Signature)				
				April 3, 2007	-7		<i>V</i> -	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORNE	EY DOCKET NO.	CONFIRMATION	N NO.
10/650,648 08/28/2003			Joseph Kessler	er 126239-1019 7282				
TITLE OF INVENTION: METHOD AND SYSTEM FOR CONTROL SYSTEM SOFTWARE								
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DE	JE PREV. PAID ISSU	IE PEE T	OTAL FEE(S) DUE	DATE DU	JE.
nonprovisional	YES	\$700	\$300	\$0		\$1000	04/03/20	
EXAMINER		ART UNIT	CLASS-SUBCLASS					
NGUYEN, KIMBINH T 2628			345-173000					
				e patent front page, I	ist	<u>-</u>		
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			(1) the names of up to 3 registered patent attorneys 1 Karl L. Larson					
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively. (2) the name of a single firm (having as a member a					
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
		A TO BE PRINTED ON						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignce is identified below, the document has been filled fo recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filling an assignment.								
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
AMX, LLC Richardson, Texas								
Please check the appropr	riate assignee category or	categories (will not be p	rinted on the patent):	☐ Individual ଯ2 C	orporation o	or other private gro	up entity Gov	vernment
Please check the appropriate assignee category or categories (will not be printed on the patent): 1 Individual 22 Corporation or other private group entity 4 Coverament 4a. The following foc(s) are submitted: 4b. Payment of Foc(s): (Please first reapply any previously paid issue fee shown above)								
XX Issue Fee A check is enclosed.								
XXI Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any								any
			overpayment, to D	posit Account Numb	oer <u>07-0163</u>	(cinelose at	extra copy of thi	s form).
	atus (from status indicale ns SMALL ENTITY state		b. Applicant is no	longer elaiming SMA	LL ENTIT	Y status. See 37 CF	R 1.27(g)(2).	
NOTE: The Issue Fee an interest as shown by the	nd Publication Fee (if req	uired) will not be accepte	d from anyone other the	n the applicant; a reg	sistered attor	mey or agent; or th	e assignee or othe	r party in
Authorized Signature	Karls			Date April	3, 2007			
Typed or printed name Karl L. Larson				Registration No. 41,141				
		FR 1.311. The informati U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to the D NOT SEND FEES OR	on is required to obtain 1.14. This collection is depending upon the in the Chief Information Of COMPLETED FORMS				by the USPTO to g gathering, prepa te you require to rtment of Comme or Patents, P.O. E	process) iring, and complete erce, P.O. Sox 1450.

Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.